



COMMUNITY DEVELOPMENT DEPARTMENT
HOUSING DIVISION

AFFORDABLE HOUSING REVIEW APPLICATION

APPLICANT/DEVELOPMENT TEAM INFORMATION

Company Name: _____
Address: _____
Contact Person: _____
Telephone No.: _____ Fax No.: _____
E-Mail: _____

Legal Status of Applicant:

For Profit Corporation ☐ Nonprofit Corporation ☐ Partner ☐
Individual Owner ☐ CHDO ☐ Other _____: ☐

Tax Identification No.: _____

Identify Development Team (*i.e., developer, builder, architect, etc.*):

GENERAL PROJECT INFORMATION

Project Name: _____
Project Address: _____
Ownership Name: _____

Project Type: ☐ New Construction ☐ Acquisition & Rehab
☐ Rehabilitation Only ☐ Homeownership
☐ Other (Please Describe): _____

Rental: ☐ Ownership: ☐
Other _____: ☐

Project Name: _____
Address/Site Location: _____

Assessor Parcel No(s): _____

Project Condition:

Unimproved Site ☐ Commercial ☐
Age _____ years Existing Structure ☐ Other _____: ☐

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Existing Uses of Property: _____

Site Control:

Deed ☐ Option ☐ Other _____ ☐

Acreage of Site: _____ Zone Designation: _____

Master Plan Community: _____ SPA Land Use District: _____

Total No. of Units Proposed: _____ No. of Affordable Units: _____

No. of Density Bonus Units: _____ Proposed Density: _____

Description of proposed:

Bedroom Mix						Total Units	# of Stories
0 Bedroom	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms	5 Bedrooms		

Describe any special features/amenities to be included within the project:

Please attach a copy of the site development plans and elevations.

FINANCIAL ASSISTANCE AND OTHER INCENTIVES

Describe all financial assistance and/or other incentives requested, including any regulatory incentives/concessions specific terms desired for the affordable housing project which you are or will be requesting from the City of Chula Vista:

Identify any other project conditions which may be relevant to project feasibility:

DEVELOPMENT - PROPOSED RENT SCHEDULE

Unit Type	No. of Units	Bedrooms Per Unit	Bathrooms Per Unit	Sq Ft Per Unit	Current Rent	Monthly Gross Rent Per Unit	Monthly Gross Rent Per Unit	Monthly Net Rent Per Unit	Monthly Market Rent per Unit	Percent Median Income	Yearly Gross Rent All Units
A					\$	\$	\$	\$	\$	%	\$
B					\$	\$	\$	\$	\$	%	\$
C					\$	\$	\$	\$	\$	%	\$
D					\$	\$	\$	\$	\$	%	\$
E					\$	\$	\$	\$	\$	%	\$
F					\$	\$	\$	\$	\$	%	\$
G					\$	\$	\$	\$	\$	%	\$
H					\$	\$	\$	\$	\$	%	\$
I					\$	\$	\$	\$	\$	%	\$
					Total Rent (Year)						\$
					Other Income (Describe)						\$
					Other Income (Describe)						\$
					Other Income (Describe)						\$
					Total Annual Income						\$
					Total Units						
					Total Square Feet						

Targeted Population (i.e., families, seniors, etc):

Term of Affordability (i.e., 30 yrs, Life of Project):

DEVELOPMENT – OPERATING EXPENSE
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OPERATING EXPENSE ITEM	ANNUAL COST	COST PER UNIT
Property Tax	\$	\$
Insurance	\$	\$
Gas & Electric	\$	\$
Water & Sewer	\$	\$
Maintenance – Labor	\$	\$
Maintenance – Supplies	\$	\$
Repairs – Labor	\$	\$
Repairs – Supplies	\$	\$
Landscape & Grounds – Labor	\$	\$
Landscape & Grounds – Supplies	\$	\$
Housekeeping – Labor	\$	\$
Housekeeping – Supplies	\$	\$
Management – Labor	\$	\$
Management – Fees	\$	\$
Payroll Taxes & Overhead	\$	\$
Advertising & Marketing	\$	\$
Trash Removal	\$	\$
Pest Control	\$	\$
Security	\$	\$
Legal	\$	\$
Accounting	\$	\$
Telephone	\$	\$
Reserve For Replacement	\$	\$
Office Expenses	\$	\$
Loan Monitoring Fee	\$	\$
ANNUAL OPERATING COST	\$	\$

DEVELOPMENT COSTS

DEVELOPMENT COST ITEM	PERCENT	AMOUNT	COST PER UNIT	COST PER SQ FT	ELIGIBLE BASIS (Tax Credit Projects)
AQUISITION					
Land		\$	\$	\$	\$
Buildings		\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
SITE IMPROVEMENTS					
Site Improvements		\$	\$	\$	\$
Demolition		\$	\$	\$	\$
Off-Site Improvements		\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
STRUCTURES					
Main Buildings		\$	\$	\$	\$
Accessory Buildings		\$	\$	\$	\$
Garages		\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
CONSTRUCTION CONTINGENCY					
Overhead & Fees	%				
General Requirements	%	\$	\$	\$	\$
Builders Overhead	%	\$	\$	\$	\$
Builders Profit	%	\$	\$	\$	\$
Bond Premium		\$	\$	\$	\$
Other Fees	%	\$	\$	\$	\$
Architect – Design	%	\$	\$	\$	\$
Architect- Supervision	%	\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
CHARGES & INTEREST					
Construction Interest Cost		\$	\$	\$	\$
Real Estate Taxes		\$	\$	\$	\$
Insurance		\$	\$	\$	\$

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DEVELOPMENT COST ITEM	PERCENT	AMOUNT	COST PER UNIT	COST PER SQ FT	ELIGIBLE BASIS (Tax Credit Projects)
Mortgage Ins. Premium		\$	\$	\$	\$
Mortgage Exam Fee		\$	\$	\$	\$
Mortgage Inspection Fee		\$	\$	\$	\$
Loan Orig. Fee –Construction		\$	\$	\$	\$
Loan Orig. Fee – Permanent		\$	\$	\$	\$
Title & Recording			\$	\$	\$
Other Charges		\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
LEGAL ORGANIZATION & AUDIT					
Legal		\$	\$	\$	\$
Organization		\$	\$	\$	\$
Audit		\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
OTHER COSTS					
Developer's Fee	%	\$	\$	\$	\$
Consultant Fee	%	\$	\$	\$	\$
Operating Reserve	%	\$	\$	\$	\$
Contingency	%	\$	\$	\$	\$
Relocation Cost		\$	\$	\$	\$
Marketing & Rent-Up		\$	\$	\$	\$
Surveys & Soil Borings		\$	\$	\$	\$
Appraisal Costs		\$	\$	\$	\$
Market Study		\$	\$	\$	\$
Environmental Study		\$	\$	\$	\$
Permits		\$	\$	\$	\$
Tcac Fees		\$	\$	\$	\$
Setup & Loan Monitoring Fees		\$	\$	\$	\$
Other:		\$	\$	\$	\$
Other:		\$	\$	\$	\$
Other:		\$	\$	\$	\$
Other:		\$	\$	\$	\$
Subtotal	%	\$	\$	\$	\$
TOTAL DEVELOPMENT COST	100%	\$	\$	\$	\$

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Construction Time: _____ (Months)

Construction Lender:

Committed: ☐ Yes ☐ No

Date of Commitment/Expected Commitment: _____

DEVELOPMENT – SOURCE OF FUNDS

PERMANENT LOANS

1ST LOAN: _____ \$ _____
LENDER AMOUNT

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

Term (Years): _____ Annual Percentage: _____%

2nd LOAN: _____ \$ _____
LENDER AMOUNT

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

Term (Years): _____ Annual Percentage: _____%

3rd LOAN: _____ \$ _____
LENDER AMOUNT

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

Term (Years): _____ Annual Percentage: _____%

Total Permanent Loans: \$ _____

DEFERRED LOANS

1ST LOAN: _____ \$ _____
LENDER AMOUNT

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

Term – Deferred for (Years): _____ Annual Percentage: _____%

2nd LOAN: _____ \$ _____
LENDER AMOUNT

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

Term – Deferred for (Years): _____ Annual Percentage: _____%

3rd LOAN: _____ \$ _____
LENDER AMOUNT

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

Term – Deferred for (Years): _____ Annual Percentage: _____%

Total Deferred Loans: \$ _____

TAX CREDITS

Committed: ☐ Yes ☐ No Date Committed Or Expected Commitment: _____

GRANTS

1.	_____	\$_____
	SOURCE	AMOUNT
Committed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Committed Or Expected Commitment: _____
2.	_____	\$_____
	SOURCE	AMOUNT
Committed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Committed Or Expected Commitment: _____
3.	_____	\$_____
	SOURCE	AMOUNT
Committed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Committed Or Expected Commitment: _____
Total Grants:		\$_____

EQUITY

1.	_____	\$_____
	SOURCE	AMOUNT
Committed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Committed Or Expected Commitment: _____
2.	_____	\$_____
	SOURCE	AMOUNT
Committed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Committed Or Expected Commitment: _____
3.	_____	\$_____
	SOURCE	AMOUNT
Committed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Committed Or Expected Commitment: _____
Total Equity:		\$_____

DEVELOPMENT-PRO FORMA

DESCRIPTION	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5
Rental Income	\$	\$	\$	\$	\$
Other Income	\$	\$	\$	\$	\$
Gross Income	\$	\$	\$	\$	\$
Vacancy	\$	\$	\$	\$	\$
Effective Gross Income	\$	\$	\$	\$	\$
Operating Expense	\$	\$	\$	\$	\$
Net Operating Income	\$	\$	\$	\$	\$
Debt Service	\$	\$	\$	\$	\$
Residual Cash	\$	\$	\$	\$	\$
Replacement Reserve	\$	\$	\$	\$	\$
Operating Reserve	\$	\$	\$	\$	\$
Debt Service Coverage	\$	\$	\$	\$	\$
Cumulative Residual	\$	\$	\$	\$	\$

DESCRIPTION	YEAR 6	YEAR 7	YEAR 8	YEAR 9	YEAR 10
Rental Income	\$	\$	\$	\$	\$
Other Income	\$	\$	\$	\$	\$
Gross Income	\$	\$	\$	\$	\$
Vacancy	\$	\$	\$	\$	\$
Effective Gross Income	\$	\$	\$	\$	\$
Operating Expense	\$	\$	\$	\$	\$
Net Operating Income	\$	\$	\$	\$	\$
Debt Service	\$	\$	\$	\$	\$
Residual Cash	\$	\$	\$	\$	\$
Replacement Reserve	\$	\$	\$	\$	\$
Operating Reserve	\$	\$	\$	\$	\$
Debt Service Coverage	\$	\$	\$	\$	\$
Cumulative Residual	\$	\$	\$	\$	\$

DESCRIPTION	YEAR 11	YEAR 12	YEAR 13	YEAR 14	YEAR 15
Rental Income	\$	\$	\$	\$	\$
Other Income	\$	\$	\$	\$	\$
Gross Income	\$	\$	\$	\$	\$
Vacancy	\$	\$	\$	\$	\$
Effective Gross Income	\$	\$	\$	\$	\$
Operating Expense	\$	\$	\$	\$	\$
Net Operating Income	\$	\$	\$	\$	\$
Debt Service	\$	\$	\$	\$	\$
Residual Cash	\$	\$	\$	\$	\$
Replacement Reserve	\$	\$	\$	\$	\$
Operating Reserve	\$	\$	\$	\$	\$
Debt Service Coverage	\$	\$	\$	\$	\$
Cumulative Residual	\$	\$	\$	\$	\$

YEARLY INCOME & EXPENSES

Rental Income: \$_____

Other Income: \$_____

Operating Expenses: \$_____

Rental Income: \$_____

ASSUMED ANNUAL INCREASES

Rental & Other Income: _____%

Operating Expenses: _____%

Vacancy Losses: _____%

Mortgage Amount: \$_____

Mortgage Rate: _____%

Mortgage Term (Years): _____

Number of Units: _____

REQUIRED ATTACHMENTS

The following items must be attached to this application:

- Site development plan for affordable housing units;
- Complete description of financial assistance or incentives including specific terms that are, or will be requested from the City of Chula Vista for the project, if applicable; and
- Completed Disclosure Statement of Ownership Interests within the project.

APPLICATION SIGNATURES

Property Owner Name:

Address:

Telephone No.:

I, the undersigned, do hereby certify that I am the legal owner of the subject project and that the above information is true and correct to the best of my knowledge.

Signature: _____ Date: _____

I, the undersigned, do hereby certify that I am the representative of the legal owner of the subject property and that the above information is true and correct to the best of my knowledge.

Signature: _____ Date: _____

THIS BOX IS FOR CITY USE ONLY

Date Application Received:

Staff Recommendation:

Date of Housing Advisory Commission Review:

Action on Application by Housing Advisory Commission:

Other Comments:

**City of Chula Vista
Affordable Housing Review Application**

DISCLOSURE STATEMENT

Applicant's statement of disclosure of certain ownership interests on all applications which will require discretionary action on the part of the City Council or any appointed board, commission, or committee.

(Please Print)

The following information must be disclosed:

1. Applicant - List the names and addresses of all persons having a financial interest in the application.

Names	Address

2. Owner - List the names and addresses of all persons having any ownership interest in the property involved.

Names	Address

3. If any person identified pursuant to (1) or (2) above is a corporation or partnership, list the names and addresses of all individuals owning more than 10% of the shares in the shares of the corporation or owning any partnership interest in the partnership.

Names	Address

4. If any person identified pursuant to (1) or (2) above is a non-profit organization or a trust, list the names and addresses of any person serving as officer or director of the non-profit organization or as a trustee or beneficiary of the trust.

Names	Address

5. Have you had more than \$250 worth of business transacted with any member of City staff, Boards, Commissions, Committees and/or City Council within the past twelve months?

Yes ☐ No ☐

If yes, please indicate person(s): _____

Person identified as: "Any individual, firm, co-partnership, joint venture, association, social club, fraternal organization, corporation, estate trust, receiver, syndicate, this and any other county, city municipality, district or other political subdivision, or any other group or combination acting as a unit."

NOTE: Attach additional pages as necessary.

Signature of Owner

Date

Print or Type Name

Signature of Applicant

Date

Print or Type Name



COMMUNITY DEVELOPMENT DEPARTMENT
HOUSING DIVISION

**HOUSING ADVISORY COMMISSION
AFFORDABLE HOUSING REVIEW APPLICATION INSTRUCTIONS**

I. APPLICABILITY

The attached application should be completed and submitted to the Community Development Department, Housing Division for all affordable housing projects, including those proposed under the City's Inclusionary Housing Policy and/or Density Bonus Program.

The Housing Advisory Commission's actions are advisory to the City Council and are independent of the actions of the Planning Commission. The recommendations of both the Planning Commission and the Housing Advisory Commission will be presented to the City Council for consideration. The City Council is the ultimate decision authority.

The Housing Advisory Commission will review and comment on three (3) major aspects of the project:

1. A project's ability to effectively serve the City's housing needs and priorities as expressed in the Housing Element and the Consolidated Plan for Housing and Community Development.
2. A project's consistency with the City's affordable housing policies as expressed in the Housing Element, General Plan and other related documents; and
3. A project's feasibility, with emphasis on prospective sources of subsidy, including any proposed City financial assistance and/or incentives.

II. PROCESS

An applicant shall complete the attached application, provide all required attachments to the application and submit the completed package to the Community Development Department, Housing Division. Please note that the applicant must submit an 8½ x 11 copy of the site development plan, elevations, and photographs of site and adjacent properties at least seven (7) days prior to the date the project is scheduled for review by the Housing Advisory Commission.

When the application is deemed to be complete by the Housing Division staff and any outstanding issues have been resolved, the Affordable Housing Project will be scheduled for review by the Housing Advisory Commission. A staff report and recommendation will be presented to the Housing Advisory Commission with the basic project information submitted within the attached application. Depending on the readiness of the project, the initial action of the Housing Advisory Commission may not include a recommendation to support the project with specific types of financial assistance or incentives.

Housing Advisory Commission meetings are scheduled for the fourth Wednesday of each month at 3:30 p.m. in the Community Development Department Housing Division Conference Room.

III. COMMENTS OR QUESTIONS

If you have any comments or questions regarding the process or the application for the Housing Advisory Commission's review of affordable housing projects, please contact the Housing Division at (619) 585-5722.